MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE NATIONAL INSTITUTES OF HEALTH

TO : D/ NHLI

DATE: July 27, 1973.

FROM : D / DTA

SUBJECT: Size and effectiveness of DTA

It is my understanding that the purpose in my being at NIH is to facilitate the development of technological devices and techniques in the interest of accomplishment of the aims of NHLI. I understood that I was brought on board because of knowledge, experience, past productivity, and image. Although self conscious about image, I am willing to lend it if my role in so doing is to be truly effective.

In the work of technological development, it is important that a staff of knowledgeable and investigatively experienced biomedical and engineering people be on hand, since in this particular field it has proven essential that protocols, methods, actual performance, and interpretations be meticulously developed and/or monitored from NHLI. This staff must have strength in each of the areas of expertise involved.

As things stand at present, many but by no means all efforts in technological development in NHLI lie in DTA. The breadth of expertise is less than desirable, and some means to widen it is highly desirable. This is difficult to resolve in the presence of strictures on in-house staffing. Recent reassignments of personnel should enhance the effectiveness of the effort by permitting a more harmonious atmosphere of collaboration in DTA.

Three possible means of bringing together the critical number of persons of proper qualifications are:

1. Reorganization of DTA Backfilling of the positions vacated in DTA this past ten days and reorganization as follows (omitting for the moment from the schema of organization the positions to be filled to replace those moved out):

> Office of Director Dennis Pitzele Janus

Power and Instrumentation Abbrecht* Powel1 Altieri

Materials and Physiology Pitzele Bruck Poirier

*See attached data on Dr. Abbrecht.

If feasible, the strength of one central core of scientific expertise could be increased by transfer of support and slots into DTA from other Divisions in relation to the projects in technological development with which they are concerned.

- 2. Establishment of a SCOR contract in DTA
 Establish a SCOR in the DTA program sufficiently close to permit very precise monitoring. The possibility might well be considered that arrangements of personnel could take account of the ceiling and that those with the needed experience in DTA who are acutely aware of the needs of the program might become full-time investigators in the near-by SCOR institution, either on a continuing basis or, in a limited number of cases, on a rotational (6 to 12 months) basis from and to the DTA staff. The proposed RFP (attached) might serve in some measure as a test of feasibility of the concept of facilitation of research and development by this means.
- 3. Changes suggested by Office of the Director / NHLI
 Make the changes suggested by the Office of D/NHLI. To be effective,
 in holding a critical number of qualified and effective scientific
 personnel in a closely knit, well organized core, the process of
 "coordination" would have to include:
- 1) Direct input to setting of individual protocols and the monitoring of progress, regardless of the Division of origin of the proposal for the work involved,
- 2) Continuity with me in these activities of those members of DTA selected by me as essential,
- 3) Numerically sufficient scientific staff of top quality responsible to me to permit this to be done right,
- 4) Control of technical development regardless of the Division in which it is funded, and
- 5) Continuity of the present program of DTA as a unit.

The aim is to get the best possible job done. Your reaction to the above is requested before my own conclusions. Following your response, and dependent upon it, I wish to discuss and plan with Doctors Lenfant, Levy, and Simon. I would like also to explore with you the possibility of fusion of the efforts of The Laboratory of Technical Development and those of the Extramural Program, which Dr. Bowman and I have discussed longingly on several occasions.

"Not budget wise.

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